## 

8 July 1974

MEMORANDUM FOR: Director of Medical Services

SUBJECT : Status of Multiphasic Testing Program

1. The Multiphasic Testing Program was placed in a hold status in early June for two principal reasons. It is anticipated that this is a temporary situation.

- 2. The basic premise of success in this program relates to the availability of a computer-assisted Information Processing System capable of handling the large volume of data that we collected. This program and trained personnel had to be available for successful operation and for prevention of clogging of OMS's current processing system. Neither of these -- program or personnel -- have become available at the dates expected. For these two principal reasons, decision was made to temporarily suspend this program.
- 3. The computer-assisted laboratory report and the computer-assisted EKG interpretation programs are ongoing. There has been a major problem with the computer-assisted medical history program. Necessary modification of the history form has been accomplished, new forms have been printed, and the program is now ready for trial.
- 4. The additional contract specialized personnel approved and needed for the program have not been available. As of now the two additional clerical personnel are on duty. The key punch operator has finally been approved to EOD and should be available this month. The systems analyst will not be available to EOD until mid-August. These specialized individuals, especially the latter two, are critical to OMS's ability to carry out this program and other ongoing fixed requirements.
- 5. Figures supplied by the Clinical Division indicate that from the initiation of the program in mid-September 1973

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until early June 1974 when the program was suspended, 1300 cases were processed. This averaged approximately 144 cases per month for the nine-month period. If the program had been running for a full twelve months, a total of 1732 cases could have been processed. This would have exceeded the FY 1974 goal. As a final figure the program falls short by some 200 cases of that goal. Those of us working on establishing this program and maintaining other ongoing programs were concerned with a multitude of problems. Among these were initiating this new program properly as well as the goal of 1500 cases.

6. It is my recommendation that the program not be resumed until all required personnel are on duty. This recommendation has been discussed with both C/CD and MSDO who agree with it.

					STATINTL
Deputy	Director	of	Medica1	Serv	ices